

MaineCare Medicaid EHR Incentive Program

2015-2017 Meaningful Use Wizard Guide

****Information for the 2015 MU submissions can be found below the installation instructions****

Before You Begin:

- Be sure your computer is running **Windows** operating system (Windows XP or higher). The Wizard does not run on a Mac or any other operating system. Please contact us if you do not have access to a windows system.
- The Wizard is sent to the professional (by email) or to an individual who is authorized to apply on behalf of the professional.
- **Please do not give the Wizard or the link to an unauthorized person.**
- Should you have more questions after reading through the guide there is a FAQ provided on the last page of this document which addresses basic questions
- Data must be entered for each individual provider. The Wizard will track the provider(s) you enter MU data for. You will be able to retrieve the information at any time and if necessary you can update any MU data that we notify you is not correct for that provider. Once the submitted MU has been accepted and submitted for payment that provider will drop out of the wizard as no changes can then be made to the MU data for the program year applied for.

To install the wizard application:

- Click the link provided in the email to download the Wizard.

***Note:** If you have a previous version of the wizard installed on your computer you will be asked to update the wizard when you open the application; no additional action is required by you **except** you must accept the updates.

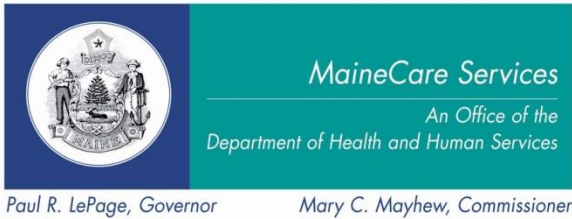
The only **exception** is - if the version of the wizard you have was put on your computer **prior to July 2013**; you will need to completely remove the old version from your computer before you download the 2015 version.

Internet Explorer:

- If you are using Internet Explorer you will see a box that allows you to click “run”. Click run and the file will automatically start after the download is complete.
- If you receive a prompt telling you to download a higher version of the .NET Framework you must follow the on-screen directions. This is required to run the Wizard and is a safe action.

Other browsers:

- Once the Wizard is downloaded you will see a “MUWizardSetup.msi” icon in your “downloads folder”.
- Double click on this setup file to run the Wizard installer.



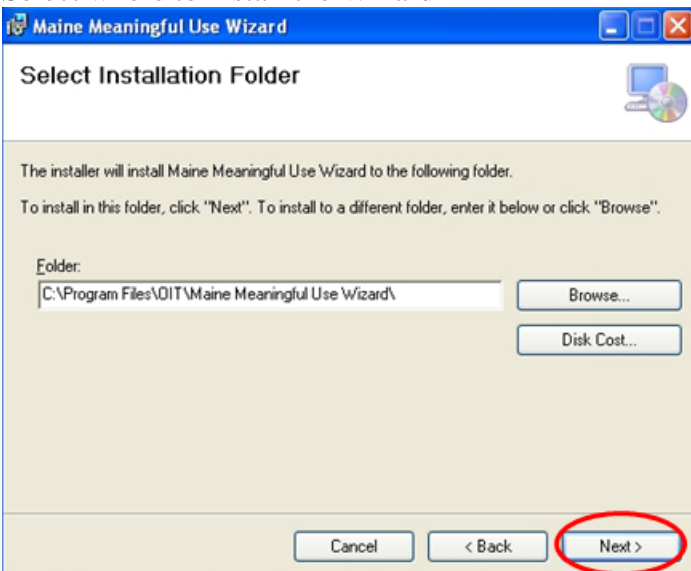
- If you receive a prompt telling you to download a higher version of the .NET Framework you must follow the on-screen directions. This is required to run the Wizard and is a safe action.

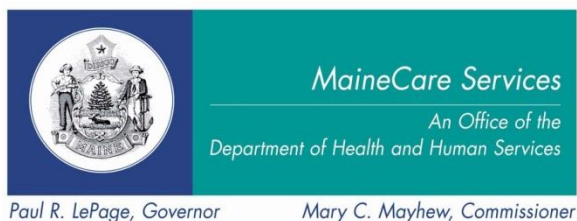
This screen will open asking you to proceed with the installation.



Click the "Next >" to continue

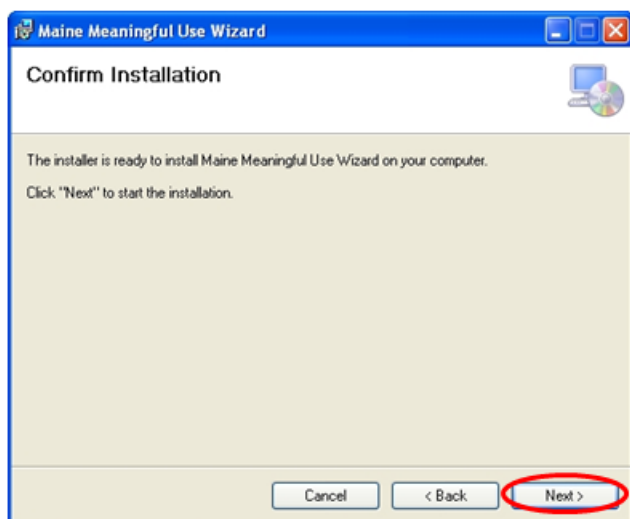
Select where to install the Wizard





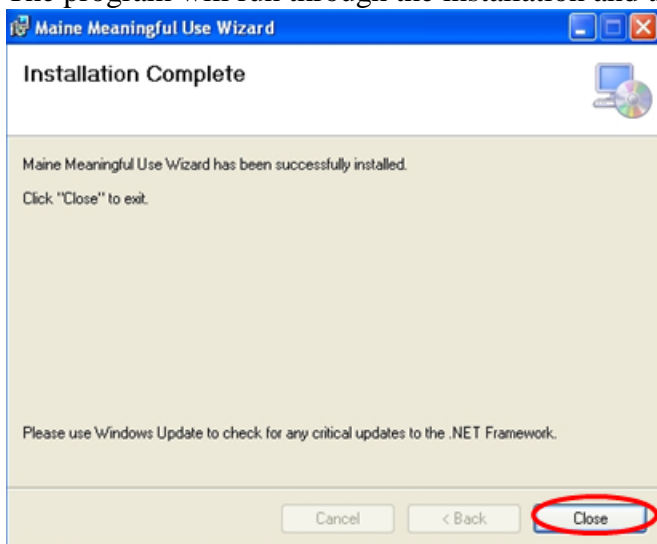
We recommend you leave everything as default, click next to continue. This will put a shortcut to the wizard on your desktop.

Confirm Installation



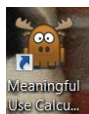
Click **Next**

The program will run through the installation and then ask you to close the installer

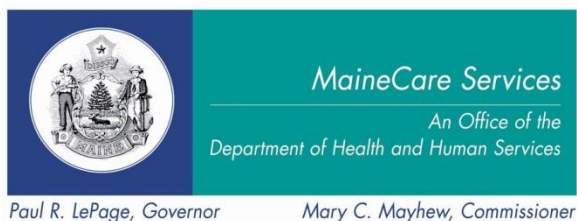


Click the **Close** button. The Wizard is installed and ready for use.

Locate the icon on your desktop that looks like the image below:



Double click this icon to open and run the Wizard.



Please note—Time delay from when a provider has been marked eligible to when the wizard will recognize the provider's NPI:

When you receive the email for each provider with the wizard link and this guide you'll know that the provider has been marked eligible in the Maine system and the wizard will recognize the provider's NPI one day after the arrival of the wizard email.

Although you'll receive the wizard email for all providers you only need to download the wizard once. We send out the emails as a check for you to be sure we have not missed marking any of your providers eligible. Large groups can request we not send out multiple emails. This guide is attached to the email but it is available within the wizard as well.

Wizard Updates

We do updates to the wizard as needed. If when you open the wizard you receive a notice that an update is available you must accept that update to continue.

New information for 2015

Modified Stage 2 Objectives

Beginning in 2015, there are several changes to the Electronic Health Record (EHR) Incentive Program objectives and measures for eligible professionals (EPs).

Here are documents regarding the 2015 changes and what is required to attest:

- [2015 What's New Modified Stage 2 Fact Sheet](#) - overall description of the 2015 – 2017 changes
- [2015 Objective Measures Table](#) – link to each specification sheet plus FAQs
- [2015 Alternate Exclusions and Specifications](#) - Providers that would have reported Stage 1 in 2015

Click this link to sign up for the [CMS EHR Incentive Programs listserv](#) for program updates and new resources

Public Health Registries

- To meet the Public Health requirement you must have registered the practice site and the providers within that site, prior to or within the first 60 days of a provider's meaningful use reporting period.
- Providers that would have reported **Stage 1 in 2015** may use the Stage 1 criteria of sending a test message to the immunization site. Please refer to: [FAQ 13409](#)
- If the practice site was registered in a previous program year you do not need to register again.
- If a practice registered previously and new providers have joined the practice since then those providers will use the date of the original practice registration when completing their MU. However, the practice must add those providers to their current Public Health registrations, for any registries applicable to the provider's scope of practice.
- If you did not register for the public health registry prior to or within the first 60 days of your 2015 meaningful use reporting period and you are submitted Modified Stage 2 you are **not eligible for program year 2015**.



Paul R. LePage, Governor

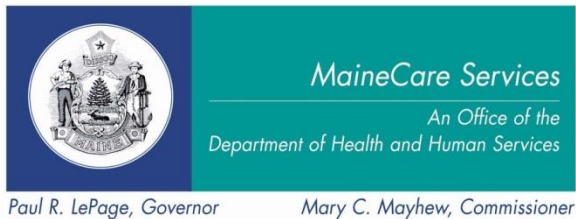
Mary C. Mayhew, Commissioner



- Please contact CMS with any questions regarding this requirement.
- **CMS EHR Information Center Hours of Operation:** 7:30 a.m. – 6:30 p.m. (Central Time) Monday through Friday, except federal holidays. 1-888-734-6433 (primary number) or 888-734-6563 (TTY number)
- As of program year 2015 the Cancer registry is considered a specialized registry. A provider registered with the Cancer registry fulfills the MU requirement for **a specialized registry**.
 - Are you an eligible professional (EP) who diagnoses or treats cancer patients? If you are a hospital or a hospital-based EP, or if you do not diagnose or treat cancer patients, you cannot select cancer reporting. Individuals or EPs in group practices who meet the criteria may select this option.
 - **Please note:** If you are a provider that will submit data to the Cancer registry you must have a CEHRT that is certified for cancer reporting. Contact your vendor to determine if your CERHT meets this requirement.
- Although the Syndromic Surveillance registry is not currently onboarding you can register your intent to onboard when the state is ready. The registration meets the requirement for MU. Most providers are eligible to submit data to the Syndromic Surveillance registry as it will include a broad range of reportable data. We do not have a date when the Syndromic Surveillance registry will begin their onboarding efforts.
- After the Public Health registration is completed you will receive an email acknowledgement. Retain that email as documentation of the date the practice was registered.

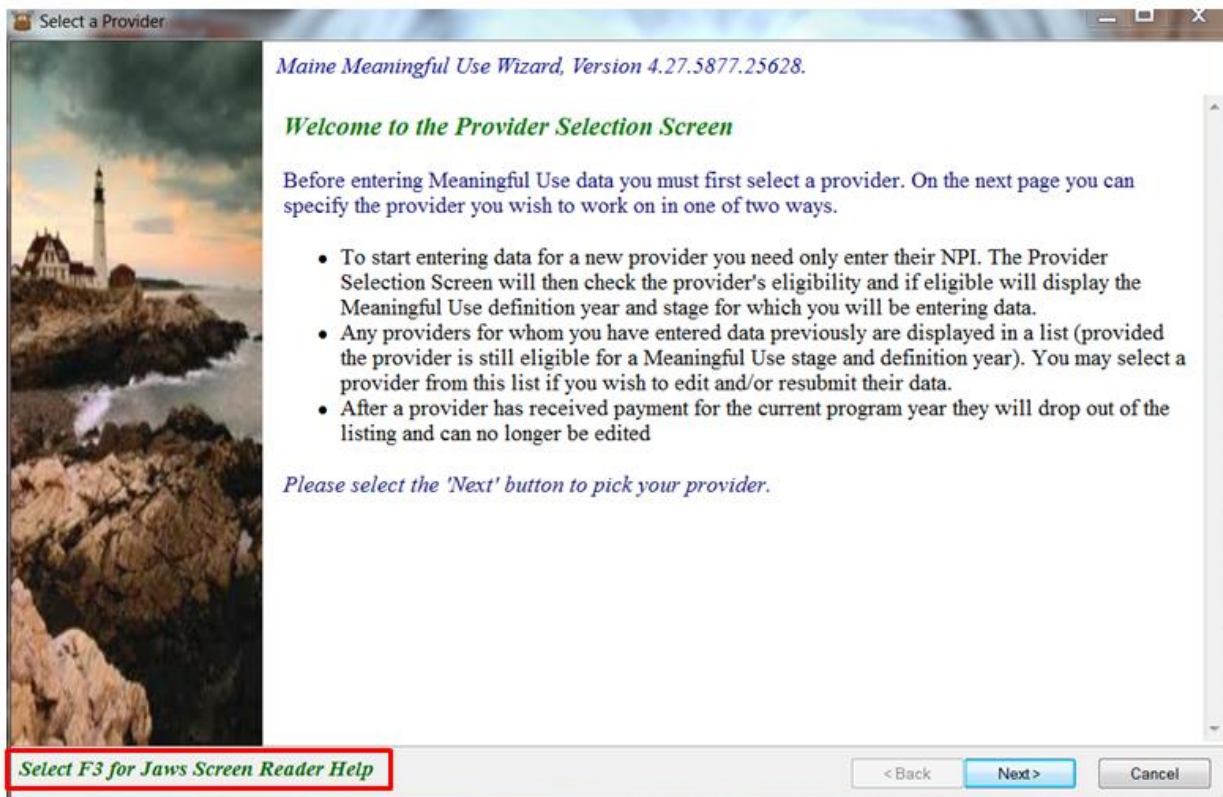
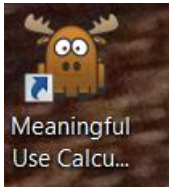
Click [this link](#) to go to the Maine Public Health registration site for additional information regarding public health registry requirements and to complete registration. The “Register Practice Wizard,” the tool used to register providers for the Maine CDC public health registries, is available for download from this site. A small application will be installed on your computer (Windows only).

****Please note**:** If you are a provider who’s scope of practice would not include submission to one or any of the public health registries, do not register for those registries. You will take the exclusion for that measure.



To Enter MU Data into the Wizard:

Double click the Moose icon on your desktop to open the application

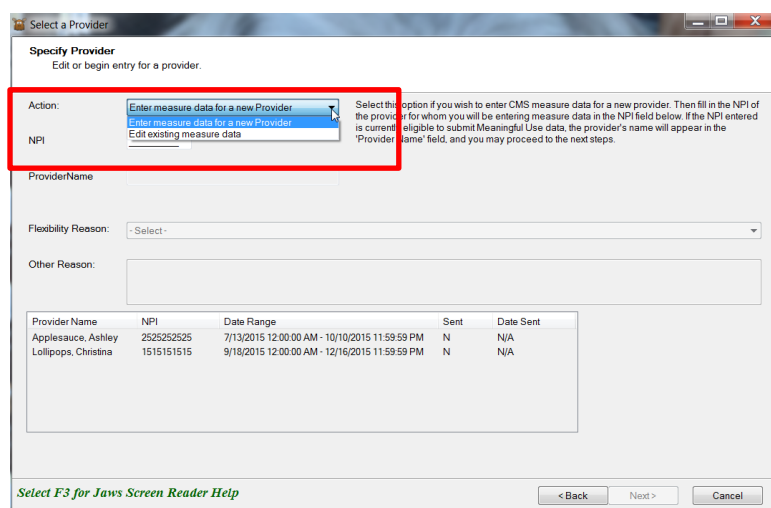


- The Jaws Screen Reader Help is available for sight impaired persons that have the Jaws Screen Reader. It is labeled on every screen. To enable push F3 on any screen.
- Select Next to proceed

Provider Selection Screen – be sure to read the information presented on each screen

This screen will be empty if you are entering your first provider into the wizard.

If you have entered providers previously the information will be pre-populated with their name, personal NPI, Meaningful Use date range and if the Meaningful Use data was sent to the State of Maine, the date it was sent.



Select a Provider

Specify Provider
Edit or begin entry for a provider.

Action: Enter measure data for a new Provider
Enter measure data for a new Provider
Edit existing measure data

NPI:

ProviderName:

Flexibility Reason: - Select -

Other Reason:

Provider Name	NPI	Date Range	Sent	Date Sent
Applesauce, Ashley	2525252525	7/13/2015 12:00:00 AM - 10/10/2015 11:59:59 PM	N	N/A
Lollipop, Christina	1515151515	9/18/2015 12:00:00 AM - 12/16/2015 11:59:59 PM	N	N/A

Select F3 for Jaws Screen Reader Help

< Back
Next >
Cancel

Action: click the drop down to choose:

1. Enter measure data for a new Provider or,
2. Edit existing measure data

Entering a provider for the first time:

- Enter the providers personal NPI into the NPI field.
- The wizard will recognize the NPI if the provider has been marked eligible in the Maine program.

NPI

Please Note: there is a 24 hour lag time for the provider's NPI to be activated in the wizard after they have been marked eligible in the Maine program.

If you attempt to enter data and the NPI does not bring the provider up in your wizard please wait one day and try again.

Select a Provider

Specify Provider
Edit or begin entry for a provider.

Action: Enter measure data for a new Provider

NPI: 111111111

ProviderName: Avocado, Jennifer

Flexibility Reason: - Select -

Other Reason:

Select this option if you wish to enter CMS measure data for a new provider. Then fill in the NPI of the provider for whom you will be entering measure data in the NPI field below. If the NPI entered is currently eligible to submit Meaningful Use data, the provider's name will appear in the 'Provider Name' field, and you may proceed to the next steps.

Either this provider is not currently eligible to apply for any Meaningful Use Stage at this time or the NPI was not entered correctly.

Provider Name	NPI	Date Range	Sent	Date Sent
Applesauce, Ashley	2525252525	7/13/2015 12:00:00 AM - 10/10/2015 11:59:59 PM	N	N/A
Lollipops, Christina	1515151515	9/18/2015 12:00:00 AM - 12/16/2015 11:59:59 PM	N	N/A

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

- You will see the screen above if the provider has **not** been marked eligible in the Maine program or the provider was marked eligible but 24 hours have not passed before attempting to enter the provider's NPI. Wait one day and try the NPI again. If the worksheet was submitted and approved and the wizard still cannot recognize the provider please contact us.
- If you have not submitted a worksheet to start the application process you will not be able to enter MU data into the wizard. Please notify the [EHR helpdesk](#) when you are ready to apply and submit provider's data.
- If you are entering MU data for a provider and need to stop, click the X in the upper right corner of the wizard or click cancel and the Wizard will auto-save the data you've entered. To continue later, reopen the Wizard and select the provider you are ready to continue entering data for. The system will have the data you entered and you can complete the input. The provider will remain in the wizard data base until the MU has been accepted by the State of Maine. Once the data is accepted the providers name and data will drop out of the wizard as the data cannot be changed once it has been accepted. If you realize that data needs to be changed after it has been accepted please notify us as soon as possible.

Select a Provider

Specify Provider

Edit or begin entry for a provider.

Action:

Edit existing measure data

Select this option if you wish to edit and/or resubmit a provider's data. Then select the desired provider from the list below. You may then proceed to the next steps.

NPI

2525252525

ProviderName

Applesauce, Ashley

Flexibility Reason:

- Select -

Other Reason:

If you would like to edit and/or resubmit

Meaningful Use Definition Year 2015 Stage 2

data for this provider, select 'Next' to continue.

Provider Name	NPI	Date Range	Sent	Date Sent
Applesauce, Ashley	2525252525	7/13/2015 12:00:00 AM - 10/10/2015 11:59:59 PM	N	N/A
Lollipop, Christina	1515151515	9/18/2015 12:00:00 AM - 12/16/2015 11:59:59 PM	N	N/A

Select F3 for Jaws Screen Reader Help


< Back

Next >

Cancel

- To access a provider that has been previously entered into the wizard select “Edit existing measure data”, then click on the provider’s name, and then click next.

Select a Provider



Congratulations. You have successfully selected your provider!

Your provider information appears below. If you are satisfied with your choice, select the 'Finish' button to proceed to the Meaningful Use Wizard.

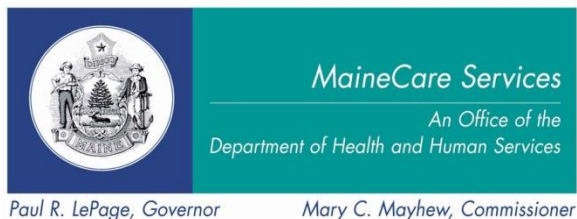
Name:	Applesauce, Ashley
NPI:	2525252525
Payment Year:	2
MU Definition Year:	2015
Stage:	2
Reporting Period:	90 days

This is the first year the provider Ashley Applesauce has submitted data for Meaningful Use Definition Year 2015, Stage 2.

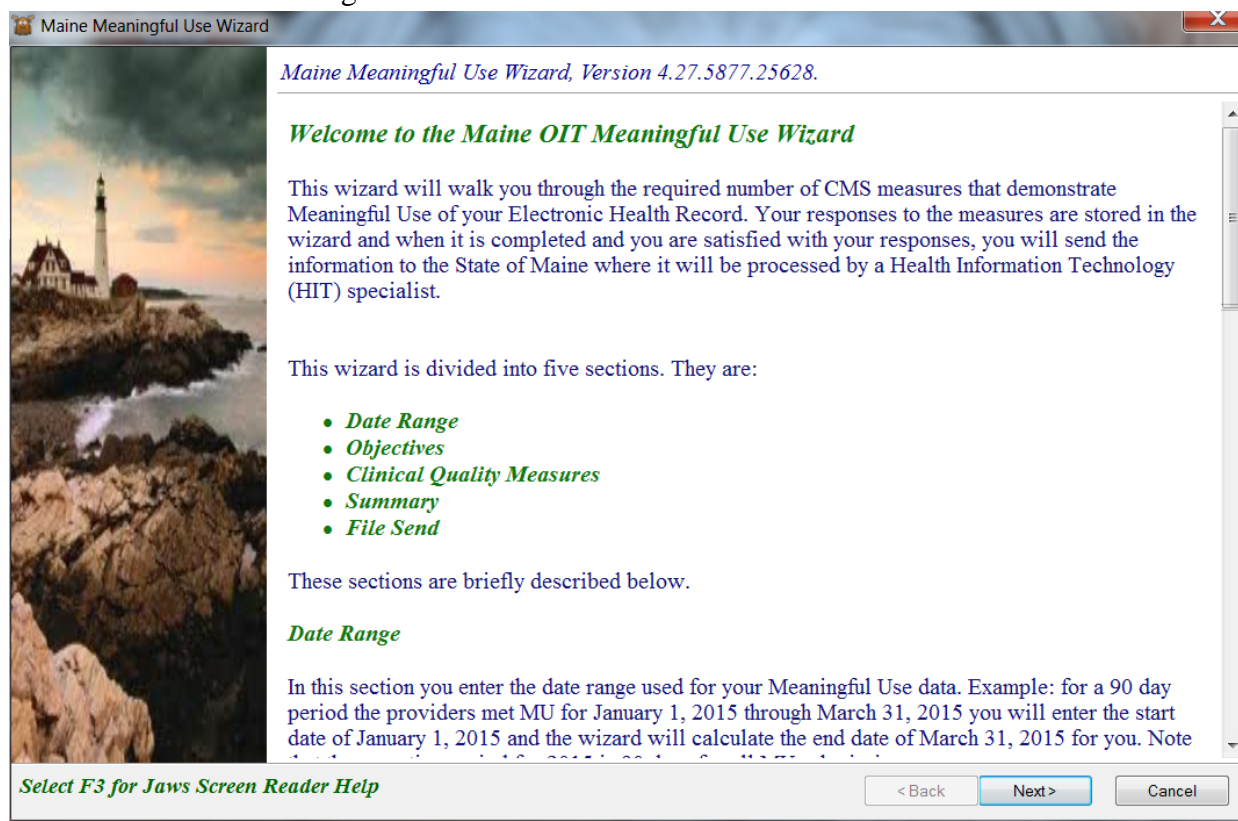
Select F3 for Jaws Screen Reader Help

< Back Finish Cancel

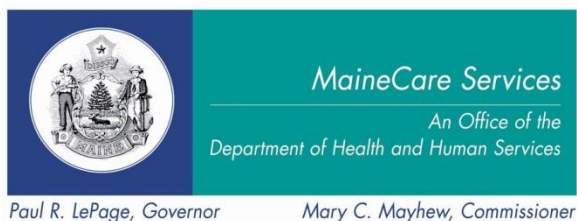
- Review the information for accuracy:
 - Provider Name
 - Provider NPI
 - Payment Year:
 - Payment year number in the incentive program
 - MU definition year:
 - 2015 is the Meaningful Use Definition year for all providers in program year 2015
 - Stage:
 - For program year 2015 all providers will submit Modified Stage 2; there are alternate exclusions and lower thresholds for providers that would have been submitting Stage 1.
 - Those providers that were scheduled for Stage 1 in 2015 will be identified in the wizard as Stage 1 for clarification.
 - Reporting period:
 - Program year **2015** - All providers will submit a **90 day MU reporting period**
 - Reporting dates of MU must be from calendar year 2015
- Click finish to begin or continue entering the providers MU data.



Instructional Welcome Page



- Scroll through the welcome page for descriptions of the areas in the wizard as well as links to resources
- All providers must be using 2014 CEHRT for program years 2015-2017
- Program year **2015** - All providers will submit a **90 day MU reporting period**
- Reporting dates of MU must be from calendar year 2015
- Reporting periods for program year 2016 will be 365 days unless 2016 is the first year of MU submission; those providers will have a 90 day reporting period



- The 2015-2017 program changes have done away with multi-year stage submissions.
- For program year 2015 all providers will submit Modified Stage 2; there are alternate exclusions and lower thresholds for providers that would have been submitting Stage 1. We will refer to providers as Stage 1 and Modified Stage 2 for simplicity in this document.

Enter the start date for the provider's Meaningful Use reporting period. The wizard will populate the end date based on what program year and stage the provider was marked eligible for.

2015 Stage 1

Maine Meaningful Use Wizard

Enter Date Range
Enter the date range for measure data.
Provider: Lollipop, Christina (NPI: 1515151515)

Provider Information

Provider Name: Lollipop, Christina
Provider NPI: 1515151515
Payment Year: 3
MU Definition Year: 2015
Stage: 1
Reporting Period: 90 days

This is the second year the provider Christina Lollipop has submitted data for Meaningful Use Definition Year 2015, Stage 1.

Date Range for Data *MU Definition Year 2015 Stage 1 (90 day reporting). The date range must be within the 2015 calendar year.*

Start Date: Monday, July 13, 2015
End Date: Saturday, October 10, 2015

Modified Stage 2

Maine Meaningful Use Wizard

Enter Date Range
Enter the date range for measure data.
Provider: Applesauce, Ashley (NPI: 2525252525)

Provider Information

Provider Name: Applesauce, Ashley
Provider NPI: 2525252525
Payment Year: 2
MU Definition Year: 2015
Stage: 2
Reporting Period: 90 days

This is the first year the provider Ashley Applesauce has submitted data for Meaningful Use Definition Year 2015, Stage 2.

Date Range for Data *MU Definition Year 2015 Stage 2 (90 day reporting)*

Start Date: Monday, July 13, 2015
End Date: Saturday, October 10, 2015

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

Maine Meaningful Use Wizard

Meaningful Use Wizard
Objectives Overview

[CMS Specification Sheet for this measure](#)
[More Information on this Measure](#)

Provider: Lollipops, Christina (NPI: 1515151515)

Section 1: Objectives

Ten out of Ten Objectives must be met according to the CMS threshold.

Section 1 - Modified Stage 2 Objectives

Beginning in 2015, there are several changes to the Electronic Health Record (EHR) Incentive Program objectives and measures for eligible professionals (EPs).

- Click [here](#) for the **2015 What's New - Fact Sheet** which contains descriptions of the 2015 changes
- EPs report on 10 objectives, which include one consolidated public health reporting objective with three measure options. Click [here](#) for the **2015 Objectives and Measures for EPs** which contains detailed descriptions of the objectives as well as other FAQs
- Click [here](#) for information on the Alternate Exclusions and Specifications for provider that would have reported Stage 1 in 2015

In addition to the resources above, each objective page in the wizard contains links to resources specific to that objective. These links can be found in the upper right-hand corner of each objective page.

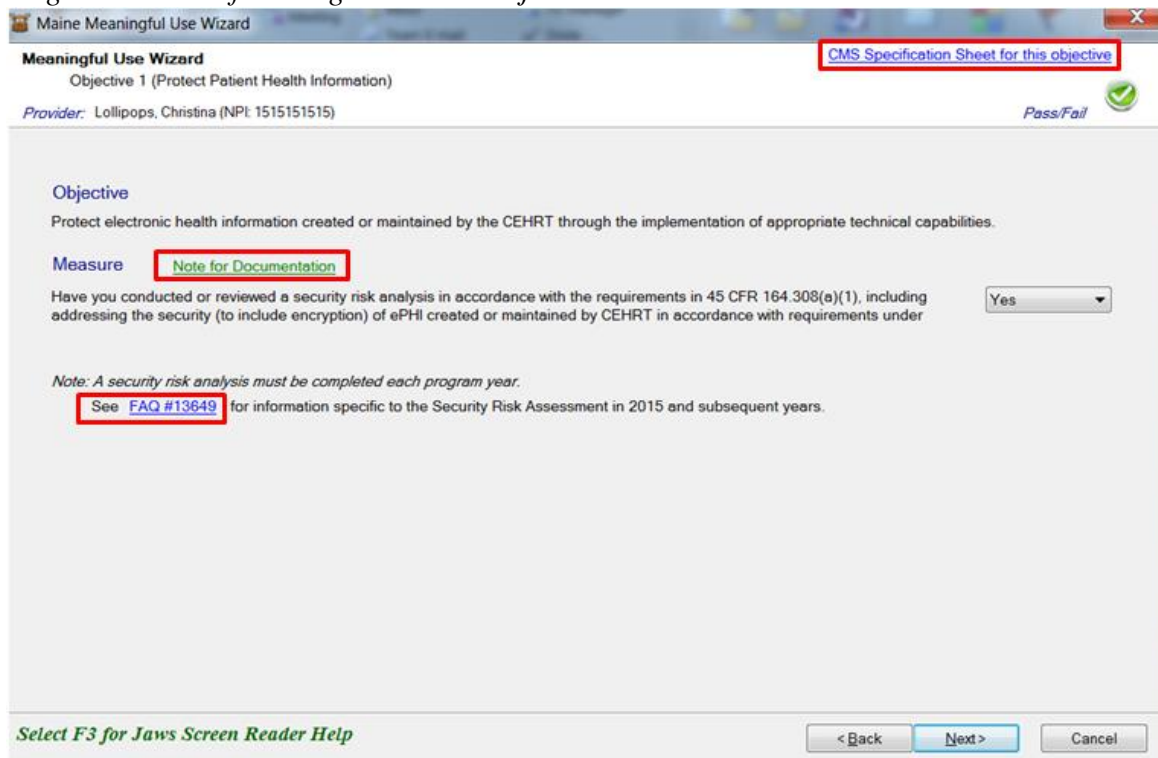
Select the 'Next' button to continue to the Objectives.

The following documents are available on this page for your reference.

- [2015 What's New Modified Stage 2 Fact Sheet](#)
- [2015 Objective Measures Table](#)
 - Link to each Objective specification sheet
 - Measure definition
 - Link to FAQs related to the Objective/Measure
- [Alternate Exclusions and/or Specifications](#) (providers scheduled to demonstrate Stage 1 for 2015)

Objective 1: Protect Patient Health Information

Stage 1 and Modified Stage 2 – same objective and measure

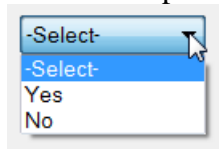




- For clarification of each objective, there is a link in the upper right corner of the screen “CMS Specification Sheet for this Objective”. A new window will open with the CMS specification sheet for that objective.
- See [FAQ #13649](#) for information specific to the Security Risk Assessment for 2015 and subsequent years
- Measures that require a yes/no answer have a reminder that comes up when you click on the “Note for Documentation” link

Note for Documentation

All yes/no answers require a screen shot of your program having the described capabilities for your records. A date needs to be added to show the required measure requirement was active during the reporting period.

- To see the options available to answer the measure click the drop down arrow and select your answer



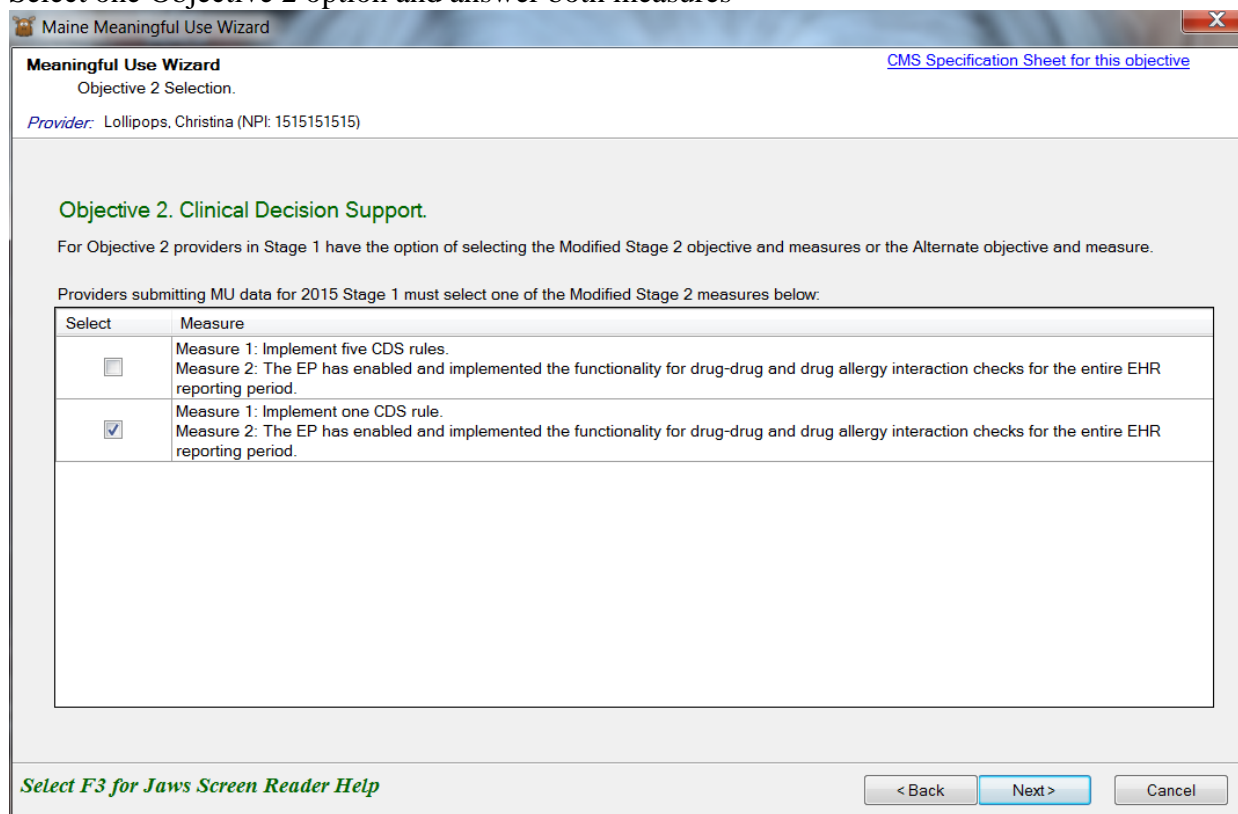
- At the top of the screen the Pass/Fail  will change to Pass/Fail  when you've completed the selection.
- Click Next to proceed

Objective 2: Clinical Decision Support

For Objective 2 providers in Stage 1 have the option of selecting the Modified Stage 2 objective and measures or the Alternate objective and measures.

- Modified Stage 2 Objective:** Use Clinical Decision Support (CDS) to improve performance on high-priority health conditions
 - Measure 1:** Implement five CDS rule
 - Measure 2:** The EP has enabled and implemented the functionality for drug-drug and drug allergy interaction checks for the entire EHR reporting period
- Alternate Objective: (available only for stage 1 providers)**
 - Alternate Measure1:** Implement one clinical decision support rule.
 - Measure 2:** The EP has enabled and implemented the functionality for drug-drug and drug allergy interaction checks for the entire EHR reporting period

Select one Objective 2 option and answer both measures



Maine Meaningful Use Wizard

Meaningful Use Wizard
Objective 2 Selection.

[CMS Specification Sheet for this objective](#)

Provider: Lollipop, Christina (NPI: 1515151515)

Objective 2. Clinical Decision Support.

For Objective 2 providers in Stage 1 have the option of selecting the Modified Stage 2 objective and measures or the Alternate objective and measure.

Providers submitting MU data for 2015 Stage 1 must select one of the Modified Stage 2 measures below:

Select	Measure
<input type="checkbox"/>	Measure 1: Implement five CDS rules. Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug allergy interaction checks for the entire EHR reporting period.
<input checked="" type="checkbox"/>	Measure 1: Implement one CDS rule. Measure 2: The EP has enabled and implemented the functionality for drug-drug and drug allergy interaction checks for the entire EHR reporting period.

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

Objective 2: Clinical Decision Support


*There are two measures for this objective; measure 2 has one exclusion available
You must select and answer each measure and exclusion to continue*

- Stage 1 alternate measure 1 and measure 2

Maine Meaningful Use Wizard

Meaningful Use Wizard [CMS Specification Sheet for this objective](#)

Objective 2 (Clinical Decision Support.)

Provider: Lollipop, Christina (NPI: 1515151515) Pass/Fail 

Objective

Implement one clinical decision support rule relevant to specialty or high clinical priority, along with the ability to track compliance with that rule.

Measure 1 [Note for Documentation](#)

Implement one clinical decision support rule. Yes ▼

Measure 2 [Note for Documentation](#)

Have you enabled and implemented the functionality for drug-drug and drug allergy interaction checks for the entire EHR reporting period? Yes ▼

Exclusion

Any provider writing fewer than 100 medication orders is excluded from measure 2. Does this exclusion apply to you? No ▼


Select F3 for Jaws Screen Reader Help < Back Next > Cancel

- Modified Stage 2

Maine Meaningful Use Wizard

Meaningful Use Wizard [CMS Specification Sheet for this objective](#)

Objective 2 (Clinical Decision Support.)

Provider: Applesauce, Ashley (NPI: 2525252525) Pass/Fail 

Objective

Use clinical decision support to improve performance on high-priority health conditions.

Measure 1 [Note for Documentation](#)

Have you implemented one clinical decision support interventions related to four or more clinical quality measures at a relevant point in patient care for the entire EHR reporting period. Absent four clinical quality measures related to an EP's scope of practice or patient population, the clinical decision support interventions must be related to high priority health conditions? Yes ▼

Measure 2 [Note for Documentation](#)

Have you enabled and implemented the functionality for drug-drug and drug-allergy interaction checks for the entire EHR reporting period. Yes ▼

Exclusion

Any provider writing fewer than 100 medication orders is excluded from measure 2. Does this exclusion apply to you? No ▼

Select F3 for Jaws Screen Reader Help < Back Next > Cancel

Objective 3: Computerized Provider Order Entry (CPOE)

****Note:** Objectives 3 & 4 require your input to identify if the data for the measure was extracted from all patient records (data from non-certified EHR, paper records, etc.) or only patient records maintained using CEHRT**

- Stage 1 - 30% target for measure 1; alternate exclusion available for measure 2 & 3

Maine Meaningful Use Wizard

Meaningful Use Wizard [CMS Specification Sheet for this objective](#)

Objective 3 (Computerized Provider Order Entry (CPOE))

Provider: Lollipops, Christina (NPI: 1515151515) Target: 30-30-30 % Provider Percentage: 100-N/A-N/A % Pass/Fail

Objective [Who can enter CPOE orders?](#)

Use computerized provider order entry for medication, laboratory, and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local, and professional guidelines.

Please indicate if the measure was extracted from ALL patient records or only from patient records maintained using certified EHR technology.

The provider is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained using technology (CEHRT)

-Select-

-Select-

All Patient Records

CEHRT

Note: Providers scheduled to be in Stage 1 in 2015 may take Alternate Exclusions for Measure 2 and 3.

Measure 1

More than 30 percent of all unique patients with at least one medication in their medication list seen by the EP during the EHR reporting period have at least one medication order entered using CPOE; or more than 30 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry

Exclusion

Any EP who writes fewer than 100 medication orders during the EHR reporting period. No

Numerator

The number of orders in the denominator recorded using CPOE. 1

Denominator

Number of medication orders created by the EP during the EHR reporting period. 1

Measure 2

More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using

Providers scheduled to be in Stage 1 in 2015 may claim an exclusion for measure 3 (radiology orders) of the Stage 2 CPOE objective for an EHR reporting period in 2015. Check the box to the right if you wish to take this exclusion. ☒ 2015 Stage 1 Exclusion

Exclusion

Any EP who writes fewer than 100 laboratory orders during the EHR reporting period. -Select-

Numerator

The number of orders in the denominator recorded using CPOE 0

Denominator

Number of laboratory orders created by the EP during the EHR reporting period. 0

Measure 3

More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using

Providers scheduled to be in Stage 1 in 2015 may claim an exclusion for measure 3 (radiology orders) of the Stage 2 CPOE objective for an EHR reporting period in 2015. Check the box to the right if you wish to take this exclusion. ☒ 2015 Stage 1 Exclusion

Exclusion

Any EP who writes fewer than 100 radiology orders during the EHR reporting period. -Select-

Numerator

The number of orders in the denominator recorded using CPOE. 0

Denominator

Number of radiology orders created by the EP during the EHR reporting period. 0

Objective 3: Computerized Provider Order Entry (CPOE)

- Modified Stage 2 – 60% target for measure 1; 30% for measure 2 and 3

Maine Meaningful Use Wizard [CMS Specification Sheet for this objective](#)

Meaningful Use Wizard
 Objective 3 (Computerized Provider Order Entry (CPOE))
 Provider: Applesauce, Ashley (NPI: 2525252525) Target: 60-30-30 % Provider Percentage: N/A-N/A-N/A % Pass/Fail

Objective [Who can enter CPOE orders?](#)
 Use computerized provider order entry for medication, laboratory, and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local, and professional guidelines.
 Please indicate if the measure was extracted from ALL patient records or only from patient records maintained using certified EHR technology.
 The provider is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained using certified EHR technology (CEHRT)

-Select-
 Select
 All Patient Records
 CEHRT

Measure 1
 More than 60 percent of medication orders created by the EP during the EHR reporting period are recorded using computerized provider order entry.

Exclusion
 Any EP who writes fewer than 100 medication orders during the EHR reporting period.

Numerator
 The number of medication orders in the denominator recorded using CPOE.

Denominator
 Number of medication orders created by the EP during the EHR reporting period.

Measure 2
 More than 30 percent of laboratory orders created by the EP during the EHR reporting period are recorded using

Exclusion
 Any EP who writes fewer than 100 laboratory orders during the EHR reporting period.

Numerator
 The number of orders in the denominator recorded using CPOE

Denominator
 Number of laboratory orders created by the EP during the EHR reporting period.

Measure 3
 More than 30 percent of radiology orders created by the EP during the EHR reporting period are recorded using

Exclusion
 Any EP who writes fewer than 100 radiology orders during the EHR reporting period.

Numerator
 Number of orders in the denominator recorded using CPOE.

Denominator
 Number of radiology orders created by the EP during the EHR reporting period.

[Click F3 for Jaws Screen Reader Help](#) < Back Next > Cancel

Throughout the Wizard the top panel will show 3 items:

1. The target requirement for the measure
2. The provider percentage - the percent achieved based on your input for this measure
3. Status: Pass/Fail

Target: 30-30-30 % Provider Percentage: 50-53-0 % Pass/Fail



You cannot proceed to the next screen if you are not meeting the target percentage. If the next button is not enabled then the data you entered is either not meeting the target percentage or is not complete. Review your information to determine what is missing.

Tip:


- All sections must be answered including exclusions to proceed
- If you have any questions about the objective push F1 on your keyboard (or click the “CMS Specification Sheet for this measure” in the upper right corner) to open the CMS documentation for that measure.

Objective 4: Electronic Prescribing

- Stage 1 – 40% target

Stage 1 100% target [CMS Specification Sheet for this objective](#)

Meaningful Use Wizard
Objective 4 (Electronic Prescribing (eRx))

Provider: Lollipop, Christina (NPI: 1515151515) Target: 40 % Provider Percentage: N/A Pass/Fail 

Objective
Generate and transmit permissible prescriptions electronically (eRx).
Please indicate if the measure was extracted from ALL patient records or only from patient records maintained using certified EHR technology.
The provider is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained using certified EHR technology (CEHRT)

Measure
More than 40 percent of all permissible prescriptions, or all prescriptions, written by the EP are transmitted electronically using CEHRT.

Exclusion 1
Any EP who writes fewer than 100 permissible prescriptions during the EHR reporting period. Does this exclusion apply to you?

Exclusion 2
Any EP who does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his/her EHR reporting period. Does this exclusion apply to you?

Numerator
The number of prescriptions in the denominator generated, queried for a drug formulary and transmitted electronically using CEHRT.

- Modified Stage 2 – 50% target

Meaningful Use Wizard
 Objective 4 (e-Prescribing (eRx))

Provider: Applesauce, Ashley (NPI: 2525252525) Target: 50 % Provider Percentage: N/A Pass/Fail

Objective
 Generate and transmit permissible prescriptions electronically (eRx).

Please indicate if the measure was extracted from ALL patient records or only from patient records maintained using certified EHR technology.

The provider is permitted, but not required, to limit the measure of this objective to those patients whose records are maintained using certified EHR technology (CEHRT)

Measure
 More than 50 percent of all permissible prescriptions written by the EP are queried for a drug formulary and transmitted electronically using CEHRT.

Exclusion 1
 Any EP who writes fewer than 100 permissible prescriptions during the EHR reporting period. Does this exclusion apply to you?

Exclusion 2
 Any EP who does not have a pharmacy within their organization and there are no pharmacies that accept electronic prescriptions within 10 miles of the EP's practice location at the start of his/her EHR reporting period. Does this exclusion apply to you?


Numerator
 The number of prescriptions in the denominator generated, queried for a drug formulary and transmitted electronically using CEHRT.

Objective 5: Health Information Exchange

****Note:** objective 5 and 7 data is required to be extracted only from patient records maintained by CEHRT**

- Stage 1 - Stage 1 may exclude from objective 5 to meet the objective

Meaningful Use Wizard
Objective 5 (Health Information Exchange.)

Provider: Lollipop, Christina (NPI: 1515151515) Target: 10 % Provider Percentage: 90.32 % Pass/Fail 

[CMS Specification Sheet for this objective](#)

Objective *The measure data entered was extracted from from patient records maintained using certified EHR technology.* ☒

The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care provides a summary care record for each transition of care or referral.


See FAQs [12817](#), [9690](#) and [10660](#) for further information on this measure.

Measure 1


Any EP who transfers a patient to another setting of care or provider of care must both use CEHRT to create a summary of care record and electronically transmit such summary to a receiving provider for more than 10 percent of transitions of care and referrals.

Providers may claim an exclusion for the Stage 2 measure that requires the electronic transmission of a summary of care document if for an EHR reporting period in 2015, they were scheduled to demonstrate Stage 1, which does not have an equivalent measure. Check the box to the right if you wish to take this exclusion. ☐ 2015 Stage 1 Exclusion


Exclusion

Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period. No 

Numerator

The number of transitions of care and referrals in the denominator where a summary of care record was created using CEHRT and exchanged electronically. 28 

Denominator


Number of transitions of care and referrals during the EHR reporting period for which the EP was the transferring or referring provider. 31 

Select F3 for Jaws Screen Reader Help

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- Modified Stage 2 - 10% target

Meaningful Use Wizard
Objective 5 (Health Information Exchange.)

Provider: Applesauce, Ashley (NPI: 2525252525) Target: 10 % Provider Percentage: N/A % Pass/Fail 

[CMS Specification Sheet for this objective](#)

Objective *The measure data entered was extracted from from patient records maintained using certified EHR technology.* ☒


The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care provides a summary care record for each transition of care or referral.

See FAQs [12817](#), [9690](#) and [10660](#) for further information on this measure.


Measure 1

Any EP who transfers a patient to another setting of care or provider of care must both use CEHRT to create a summary of care record and electronically transmit such summary to a receiving provider for more than 10 percent of transitions of care and referrals.


Exclusion

Any EP who transfers a patient to another setting or refers a patient to another provider less than 100 times during the EHR reporting period. Does this exclusion apply to you? Yes 

Numerator

The number of transitions of care and referrals in the denominator where a summary of care record was created using CEHRT and exchanged electronically. 0 

Denominator

Number of transitions of care and referrals during the EHR reporting period for which the EP was the transferring or referring provider. 0 

Three FAQs relate to Objective 5: click the link for more information

- [FAQ 12821](#)
- [FAQ 12825](#)
- [FAQ 8231](#)



- Stage 1 - Stage 1 may exclude from objective 6 to meet the objective

- Modified Stage 2 - 10% target

Objective 7: Medication Reconciliation

- Stage 1 providers may enter data or take the exclusion for objective 7

Meaningful Use Wizard


Objective 7 (Medication Reconciliation)

[CMS Specification Sheet for this objective](#)

Provider: Lollipop, Christina (NPI: 1515151515)

Target: 50 %

Provider Percentage: 77.4 %

Pass/Fail 

Objective

The measure data entered was extracted from from patient records maintained using certified EHR technology: ☒

The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation.

Measure

The EP performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

Providers may claim an exclusion for the measure of the Stage 2 Medication Reconciliation objective if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1 but did not intend to select the Stage 1 Medication Reconciliation menu objective. Check the box to the right if you wish to take this exclusion. ☐ 2015 Stage 1 Exclusion

Exclusion

Any EP who was not the recipient of any transitions of care during the EHR reporting period. Does this exclusion apply to you? No

Numerator

The number of transitions of care in the denominator where medication reconciliation was performed. 113

Denominator

Number of transitions of care during the EHR reporting period for which the EP was the receiving party of the transition. 146

- Modified Stage 2 - 50% target
- Example shows a provider answers the data extraction by clicking the box and meets the through the exclusion

Meaningful Use Wizard


Objective 7 (Medication Reconciliation)

[CMS Specification Sheet for this objective](#)

Provider: Applesauce, Ashley (NPI: 2525252525)

Target: 50 %

Provider Percentage: N/A

Pass/Fail 

Objective

The measure data entered was extracted from from patient records maintained using certified EHR technology: ☒

The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant performs medication reconciliation.

Measure

The EP performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

Exclusion

Any EP who was not the recipient of any transition of care during the EHR reporting period qualifies for an exclusion. Does this exclusion apply to you? Yes

Numerator

The number of transitions of care in the denominator where medication reconciliation was performed. 0

Denominator

Number of transitions of care during the EHR reporting period for which the EP was the receiving party of the transition. 0



Paul R. LePage, Governor Mary C. Mayhew, Commissioner



Objective 8: Patient Electronic Access (VDT)

- Stage 1 - Stage 1 must meet measure 1; may exclude from measure 2

Meaningful Use Wizard
Objective 8 (Patient Electronic Access.)
[CMS Specification Sheet for this objective](#)

Provider: Lollipop, Christina (NPI: 1515151515) Target: 50 and > 0 % Provider Percentage: 100-N/A % Pass/Fail

Objective
Provide patients the ability to view online, download, and transmit their health information within 4 business days of the information being available to the EP.

Measure 1
More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.

Numerator
The number of patients in the denominator who have access to view online, download and transmit their health

Denominator [Note on Denominator](#)
Number of unique patients seen by the EP during the EHR reporting period.

Measure 2
At least one patient seen by the EP during the EHR reporting period (or patient authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.

Providers may claim an exclusion for the second measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure. Check the box to the right if you wish to take this exclusion. ☒ 2015 Stage 1 Exclusion

Exclusion1
The provider neither orders nor creates any of the information listed for inclusion as part of the measures. Does this exclusion

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

- Modified Stage 2 – 2 measures: measure 1- 50% target; measure 2 – at least 1 patient

Meaningful Use Wizard
Objective 8 (Patient Electronic Access.)
[CMS Specification Sheet for this objective](#)

Provider: Applesauce, Ashley (NPI: 2525252525) Target: 50 and > 0 % Provider Percentage: 71.43 - 14.29 Pass/Fail

Objective
Provide patients the ability to view online, download, and transmit their health information within 4 business days of the information being available to the EP.

Measure 1
More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely access to view online, download, and transmit to a third party their health information subject to the EP's discretion to withhold certain information.

Exclusion1
Neither orders nor creates any of the information listed for inclusion as part of the measures except for "Patient Name" and "Provider's name and office contact information."

Numerator
The number of patients in the denominator who have access to view online, download and transmit their health

Denominator
Number of unique patients seen by the EP during the EHR reporting period.

Measure 2
At least one patient seen by the EP during the EHR reporting period (or patient authorized representative) views, downloads, or transmits to a third party his or her health information during the EHR reporting period.

Exclusion1
The provider neither orders nor creates any of the information listed for inclusion as part of the measures. Does this exclusion apply to you?

Exclusion2
Any EP who conducts 50 percent or more of their patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the latest information available from the FCC on the first day of the reporting period.

Numerator
The number of patients in the denominator (or patient-authorized representative) who view, download, or transmit to

Denominator
Number of unique patients seen by the EP during the EHR reporting period.

Objective 9: Secure Messaging

- Stage 1 - Stage 1 may exclude from objective 9 to meet the objective

Maine Meaningful Use Wizard

Meaningful Use Wizard
[CMS Specification Sheet for this objective](#)

Objective 9 (Use Secure Electronic Messaging)

Provider: Lollipopops, Christina (NPI: 1515151515)

Pass/Fail

Objective

Use secure electronic messaging to communicate with patients on relevant health information.

Measure
[Note for Documentation](#)

For an EHR reporting period in 2015, the capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period.

-Select-

An EP may claim an exclusion for the measure if for an EHR reporting period in 2015 they were scheduled to demonstrate Stage 1, which does not have an equivalent measure. Check the box to the right if you wish to take this exclusion.

☒
2015 Stage 1 Exclusion

- Modified Stage 2 –select yes/no

Maine Meaningful Use Wizard

Meaningful Use Wizard
[CMS Specification Sheet for this objective](#)

Objective 9 (Use Secure Electronic Messaging)

Provider: Applesauce, Ashley (NPI: 2525252525)

Pass/Fail

Objective

Use secure electronic messaging to communicate with patients on relevant health information.

Measure
[Note for Documentation](#)

For an EHR reporting period in 2015, the capability for patients to send and receive a secure electronic message with the EP was fully enabled during the EHR reporting period.

Yes

Exclusion

Any EP who has no office visits during the EHR reporting period, or any EP who conducts 50 percent or more of his or her patient encounters in a county that does not have 50 percent or more of its housing units with 4Mbps broadband availability according to the

No



Paul R. LePage, Governor

Mary C. Mayhew, Commissioner



Objective 10: Public Health Reporting

- **Measure 1 - Immunization Registry Reporting:** The EP is in active engagement with a public health agency to submit immunization data.
 - *Active engagement includes completing the registration regardless of whether the site has been on boarded or not (applies to all three measures)*
- **Measure 2 – Syndromic Surveillance Reporting:** The EP is in active engagement with a public health agency to submit syndromic surveillance data.
- **Measure 3 – Specialized Registry Reporting:** The EP is in active engagement to submit data to a specialized registry. **Note:** The Cancer Registry is considered a Specialized Registry

Please note: the registration date for the public health registry **must** occur prior to or within the first 60 days of the providers reporting period. If a registration was completed in a previous program year that registration is valid. The practice site should update the registrations for providers when they join or leave the site. For a new provider that joins a site that has an established registration that provider's registration date is the date of the original practice site registration.

Examples for Stage 1 and Modified Stage 2:

Stage 1 – must attest to **one** measure from the Public Health Reporting Objective

- **Stage 1: to meet measure one(select one of the following):**
 1. Submitted a test submission to the immunization test site and received an acknowledgement email either in this program year or in a previous program year – **select:** yes or no
- **or**
 2. The EP is in active engagement with a public health agency to submit immunization data
 - *Active engagement includes completing the registration regardless of whether the site has been on boarded or not - **select:** yes or no*
- **Stage 1: exclusion (only one exclusion is available)**
 - If you are a provider type that does not give immunizations **select** the exclusion: Does not administer any immunizations...
 - Maine has Public Health registries available therefore exclusions 2 & 3 are not available to select for any of the three measures of objective 10.
- **Stage 1: Alternate exclusion**
 - May claim an *alternate exclusion* for Measure 1, Measure 2, or Measure 3.
 - An Alternate Exclusion may only be claimed for up to two measures, then the provider must either meet the requirement or meet the exclusion for the remaining measure

If a provider in Stage 1 meets the exclusion for measure 1 because they do not give immunizations they must select the 2015 Stage 1 exclusions for the remaining two measures.

Modified Stage 2 - must meet or exclude to **two** measures form the Public Health Reporting Objective. If a provider is eligible for an exclusion then all three measure must be addressed by either meeting or excluding.

- Modified Stage 2: to meet measure 1
 1. The EP is in active engagement with a public health agency to submit immunization data.
 - Active engagement includes completing the registration regardless of whether the site has been on boarded or not - **select**: yes or no
- Modified Stage 2: exclusion
 1. If you are a provider type that does not give immunizations **select** the exclusion – Does not administer any immunizations...
 2. Maine has Public Health registries available therefore exclusions 2 & 3 are not available to select for any of the three measures of objective 10.
- Modified Stage 2: Alternate exclusion
 1. May claim one *alternate exclusion* for Measure 2 or Measure 3 (Syndromic Surveillance Measure or Specialized Registry Reporting Measure).

Objective 10, Public Health Measures Overview.

Public Health Reporting – Modified Stage 2 requirements to meet objective

To meet the requirements of objective 10 you must have:

- Registered the practice site and the providers within that site with the Maine CDC prior to or within the first 60 days of the provider's meaningful use reporting period.
 - You only need register once. If you have already registered with the CDC you need not register again.
 - If new providers have joined the practice since you registered with the CDC, those providers are covered by the date of the original practice registration.
- *Exclusion Criteria*
 - The provider must either attest to or meet the exclusion requirement for measure 1.
 - The provider may use the alternate exclusion for either measure 2 or measure 3.
 - *Two exclusions offered by CMS are not applicable to Maine Providers. They are:*
 - Operates in a jurisdiction for which no Public Health registry or Public Health information system is capable of accepting the specific standards required to meet the CEHRT definition at the start of the EHR reporting period; or
 - Operates in a jurisdiction where no Public Health registry or Public Health information system has declared readiness to receive Public Health data from the EP at the start of the EHR reporting period.
 - The State of Maine has implemented registration with the Public Health Registries and therefore these exclusions do not apply to providers practicing in the State

Note: In program year 2015 the Cancer registry is designated as a specialty registry.

If you have not registered for the public health registry prior to or within the first 60 days of your meaningful use reporting period you are not eligible for program year 2015.

- *Please contact CMS with any questions regarding this requirement. The CMS EHR Information Center hours of operation are 7:30 a.m. – 6:30 p.m. (Central Time) Monday through Friday, except federal holidays. Numbers are 1-888-734-6433 (primary number) or 888-734-6563 (TTY number)*

Please select the 'Next' button to continue to Objective 10.

Objective 10: Public Health Reporting Stage 1

For a provider in Stage one if they meet measure one either by the test submission or the registration they meet the objective. The provider selects yes for measure one and no for exclusion one


Meaningful Use Wizard

Objective 10 (Public Health Reporting)

Provider: Lollipops, Christina (NPI: 1515151515)

[CMS Specification Sheet for this objective](#)

[FAQ for measure](#)

Pass/Fail 

Objective

The EP is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Requirements

Providers submitting for 2015 Stage 1 must attest to at least one measure below.

Measure 1 [Note for Documentation](#)

The EP has submitted a test submission to the immunization test site and received an acknowledgement email either in this program year or in a previous program year. Yes

OR

The EP is in active engagement to submit immunization data by registering for the Immunization registry.

An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining measure described in 495.22 (e)(10)(i). Check the box to the right if you wish to take this exclusion.

☐ 2015 Stage 1 Exclusion

Exclusion 1

Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or immunization information system during the EHR reporting period No

Measure 2 [Note for Documentation](#)

The EP is in active engagement with a public health agency to submit syndromic surveillance data. No

Select F3 for Jaws Screen Reader Help

< Back **Next >** Cancel

The provider has selected the exclusion for measure 1 as they do not give immunizations. They will select the 2015 Stage 1 exclusion for the other 2 measures to meet the objective


Meaningful Use Wizard

Objective 10 (Public Health Reporting)

Provider: Lollipops, Christina (NPI: 1515151515)

[CMS Specification Sheet for this objective](#)

[FAQ for measure](#)

Pass/Fail 

Objective

The EP is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Requirements

Providers submitting for 2015 Stage 1 must attest to at least one measure below.

Measure 1 [Note for Documentation](#)

The EP has submitted a test submission to the immunization test site and received an acknowledgement email either in this program year or in a previous program year. No

Or

The EP is in active engagement to submit immunization data by registering for the Immunization registry.

An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining measure described in 495.22 (e)(10)(i). Check the box to the right if you wish to take this exclusion.

☐ 2015 Stage 1 Exclusion

Exclusion 1

Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or immunization information system during the EHR reporting period Yes

Measure 2 [Note for Documentation](#)

The EP is in active engagement with a public health agency to submit syndromic surveillance data. -Select-

An Alternate Exclusion may only be claimed for up to two measures, then the provider must either attest to or meet the exclusion requirements for the remaining measure described in 495.22 (e)(10)(i). Check the box to the right if you wish to take this exclusion.

☒ 2015 Stage 1 Exclusion

Modified Stage 2: Must meet or exclude for two public health measures. If any exclusion is selected the provider will need to answer all three measures.

Meeting by exclusion: The sample below shows a provider that is eligible for the exclusion for measure 1 (does not give immunizations) and measure 2 (scope of practice does not include submitting to a Syndromic Surveillance registry); then selects the Stage 2 2015 Exclusion for measure 3 to meet the objective

Objective
The EP is in active engagement with a public health agency to submit electronic public health data from CEHRT except where prohibited and in accordance with applicable law and practice.

Requirements
Providers submitting for 2015 Stage 2 must attest to measure 1 (immunization) and at least one other measure below.

Measure 1 [Note for Documentation](#)
The EP is in active engagement with a public health agency to submit immunization data. No

Exclusion 1
Does not administer any immunizations to any of the populations for which data is collected by its jurisdiction's immunization registry or immunization information system during the EHR reporting period Yes

Measure 2 [Note for Documentation](#)
The EP is in active engagement with a public health agency to submit syndromic surveillance data. No

Providers scheduled to be in Stage 2 in 2015 may claim an alternate exclusion for Measure 2 (Syndromic Surveillance) or Measure 3 (Specialized Registry Reporting Measure). ☐ Stage 2 2015 Exclusion

Exclusion 1
Is not in a category of providers from which ambulatory syndromic surveillance data is collected by their jurisdiction's syndromic surveillance system Yes

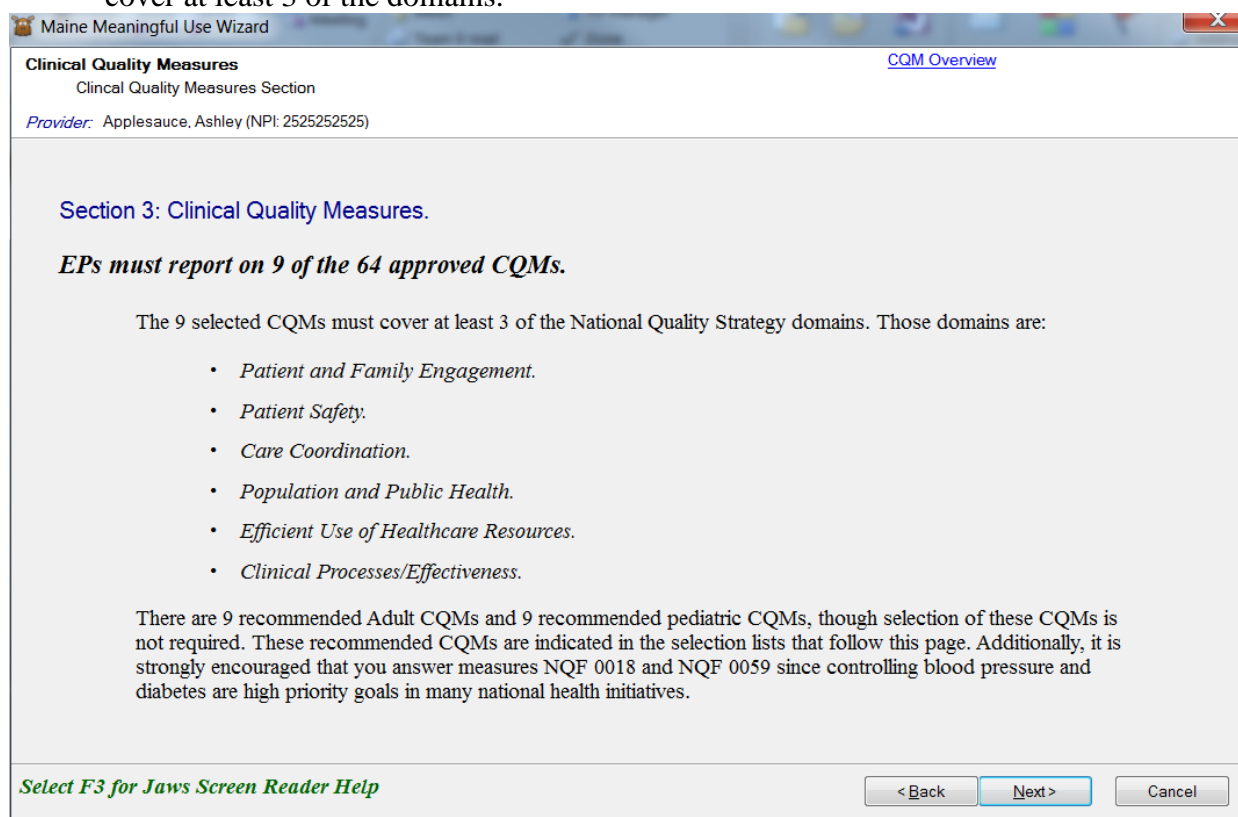
Measure 3 [Note for Documentation](#)
The EP is in active engagement to submit data to a specialized registry. No

Providers scheduled to be in Stage 2 in 2015 may claim an alternate exclusion for Measure 2 (Syndromic Surveillance) or Measure 3 (Specialized Registry Reporting Measure). ☒ Stage 2 2015 Exclusion

Exclusion 1
Does not diagnose or treat any disease or condition associated with, or collect relevant data that is collected by, a specialized registry in their jurisdiction during the EHR reporting period. No

Clinical Quality Measures

- No changes in the CQM requirements for 2015
- 2015 all providers – select a minimum of 9 CQM measures
- CQMs are grouped under the National Quality Strategy Domains. A provider must select 9 CQMs that cover at least 3 of the domains.



Maine Meaningful Use Wizard

Clinical Quality Measures
Clinical Quality Measures Section

[CQM Overview](#)

Provider: Applesauce, Ashley (NPI: 2525252525)

Section 3: Clinical Quality Measures.

EPs must report on 9 of the 64 approved CQMs.

The 9 selected CQMs must cover at least 3 of the National Quality Strategy domains. Those domains are:

- Patient and Family Engagement.
- Patient Safety.
- Care Coordination.
- Population and Public Health.
- Efficient Use of Healthcare Resources.
- Clinical Processes/Effectiveness.

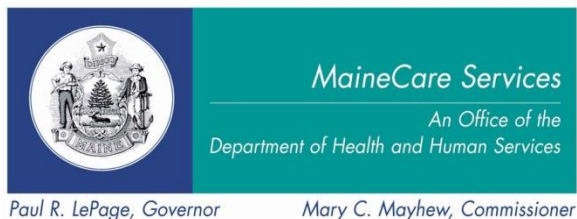
There are 9 recommended Adult CQMs and 9 recommended pediatric CQMs, though selection of these CQMs is not required. These recommended CQMs are indicated in the selection lists that follow this page. Additionally, it is strongly encouraged that you answer measures NQF 0018 and NQF 0059 since controlling blood pressure and diabetes are high priority goals in many national health initiatives.

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

The selection of CQM measures is where the greatest impact of the Meaningful Use program will be demonstrated. As the program matures and more data can be gathered and analyzed this is the area that will give the information that will lead to the ultimate goal of improved healthcare for patients. As you review your meaningful use reports choose the CQMs that reflect your practice data. There is a required number of CQMs you must answer but you are not restricted in the number you can enter. If you have data for CQMs please enter all you can as the more data collected the more useful the meaningful use program will ultimately be.

CMS has recommendations for adult and pediatric CQMs. We have identified them in the wizard but you are not required to report on those specific measures unless they are applicable to your practice type and your CEHRT has data for the recommended measures



Maine Meaningful Use Wizard

Clinical Quality Domain
Select Measures from the Patient and Family Engagement domain.

Provider: Applesauce, Ashley (NPI: 2525252525)

Patient and Family Engagement
Please select any Clinical Quality Measures you wish to answer from the Patient and Family Engagement domain or select 'Next' to continue to the next category.

Select	eMeasure Id	NQF Id	Title	Description	Recommended CQM (Adult)	Recommended CQM (Pediatric)	Recommended CQM (Maine)
<input checked="" type="checkbox"/>	CMS157v2	NQF 0384	Oncology Medical and Radiation - Pain Intensity Quantified.	Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified.			
<input checked="" type="checkbox"/>	CMS56v2	<none>	Functional Status Assessment for Hip Replacement.	Percentage of patients aged 18 years and older with primary total hip arthroplasty (THA) who completed baseline and follow-up (patient-reported) functional status assessments.			
<input type="checkbox"/>	CMS66v2	<none>	Functional Status Assessment for Knee Replacement.	Percentage of patients aged 18 years and older with primary total knee arthroplasty (TKA) who completed baseline and follow-up (patient-reported) functional status assessments.			

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

CQMs are identified when possible by the eMeasure ID, the NQF ID as well as the title. Scroll through to see all available CQMS and select those you have data for. There are six domain listings with varying numbers of selections per domain.

If you find you do not have data for enough measures you can enter zeros and the wizard will accept the zero entry after it prompts you to select any measure for which you have data.

As you move through the screens you will see a listing of what you have met for CQM requirements at the top of the screen.

Mrs Req. 9 Mrs Slctd. 9 Dms Req. 3 Dms Slctd. 5

Maine Meaningful Use Wizard

Meaningful Use Wizard
Clinical Quality Measure CMS68v3 (NQF 0419)

Provider: Applesauce, Ashley (NPI: 2525252525)

CMS Specification Sheet for this measure

Mrs Req. 9 Mrs Slctd. 9 Dms Req. 3 Dms Slctd. 5

Title
Documentation of Current Medications in the Medical Record.

Description
Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate or long-term medications. This list must include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the route of administration.

Complete the following information:

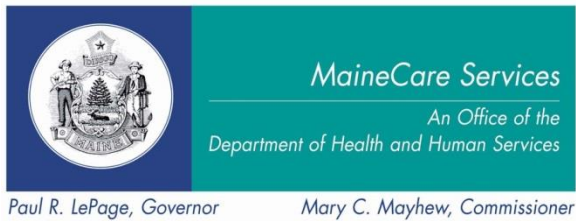
Numerator: 10

Denominator: 10

Exception: 0

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel



Screen shows the provider has not selected the required number of CQMs and the provider cannot proceed

Maine Meaningful Use Wizard

Clinical Quality Measures
Clinical Quality Measures Section
Provider: Applesauce, Ashley (NPI: 2525252525)

Clinical Quality Measure Summary.

EPs must report on 9 of the 64 approved CQMs selected from at least 3 Domains.

Domain	Number of Measures
Patient and Family Engagement.	0
Patient Safety.	0
Care Coordination.	0
Population and Public Health.	0
Efficient Use of Healthcare Resources.	0
Clinical Processes/Effectiveness.	0

You must respond to at least 9 measures from 3 domains. Please use the back button to return to the measure selection pages.
You must select at least 9 more measure(s) from 3 more domain(s).

Select F3 for Jaws Screen Reader Help

< Back Next > Cancel

Screen shows the correct number of CQMs and domains selected. The Next button is active.

Maine Meaningful Use Wizard

Clinical Quality Measures
Clinical Quality Measures Section
Provider: Applesauce, Ashley (NPI: 2525252525)

Clinical Quality Measure Summary.

EPs must report on 9 of the 64 approved CQMs selected from at least 3 Domains.

Domain	Number of Measures
Patient and Family Engagement.	2
Patient Safety.	1
Care Coordination.	1
Population and Public Health.	2
Efficient Use of Healthcare Resources.	0
Clinical Processes/Effectiveness.	3

Congratulations. You have selected at least 9 measures from at least 3 domains. Please select the 'Next' button to review your Core, Menu, and Clinical Quality Measure selections.

Select F3 for Jaws Screen Reader Help

< Back **Next >** Cancel

Completion & Submission:

When you have entered all of your data you will see the summary screens. There will be one screen for the MU objectives and a separate summary for the CQMs.

***Note:** You must save these files for documentation of your submission.

Meaningful Use Wizard

Provider: Applesauce, Ashley (NPI: 2525252525)

Objectives Summary

Provider Information

Name: Applesauce, Ashley
NPI: 2525252525

Objectives

Objective 1

Measure Code: [Objective 1](#)
Pass/Fail:
Objective: Protect electronic health information created or maintained by the CEHRT through the implementation of appropriate technical capabilities.

Entries for Objective 1

Measure: Have you conducted or reviewed a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI created or maintained by CEHRT in accordance with requirements under 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the EP's risk management process?

Maine OIT strongly suggests you save your settings to a file.

Save to FilePrintView in Browser

Select F3 for Jaws Screen Reader Help

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Meaningful Use Wizard

Provider: Applesauce, Ashley (NPI: 2525252525)

Clinical Quality Measures Summary

Provider Information

Name: Applesauce, Ashley
NPI: 2525252525

Clinical Quality Measures

Measure	Description	Values						
Patient and Family Engagement Domain								
(CMS157v2)	Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified.	<div>Submeasure 1</div> <table><thead><tr><th>Numerator</th><th>Denominator</th></tr></thead><tbody><tr><td>10</td><td>10</td></tr></tbody></table>	Numerator	Denominator	10	10		
Numerator	Denominator							
10	10							
(CMS56v2)	Percentage of patients aged 18 years and older with primary total hip arthroplasty (THA) who completed baseline and follow-up (patient-reported) functional status assessments.	<div>Submeasure 1</div> <table><thead><tr><th>Numerator</th><th>Denominator</th><th>Exclusion</th></tr></thead><tbody><tr><td>10</td><td>10</td><td>0</td></tr></tbody></table>	Numerator	Denominator	Exclusion	10	10	0
Numerator	Denominator	Exclusion						
10	10	0						
Percentage of patients aged 18 years and older with primary total knee arthroplasty (TKA) who completed baseline and follow-up (patient-reported) functional status assessments.								

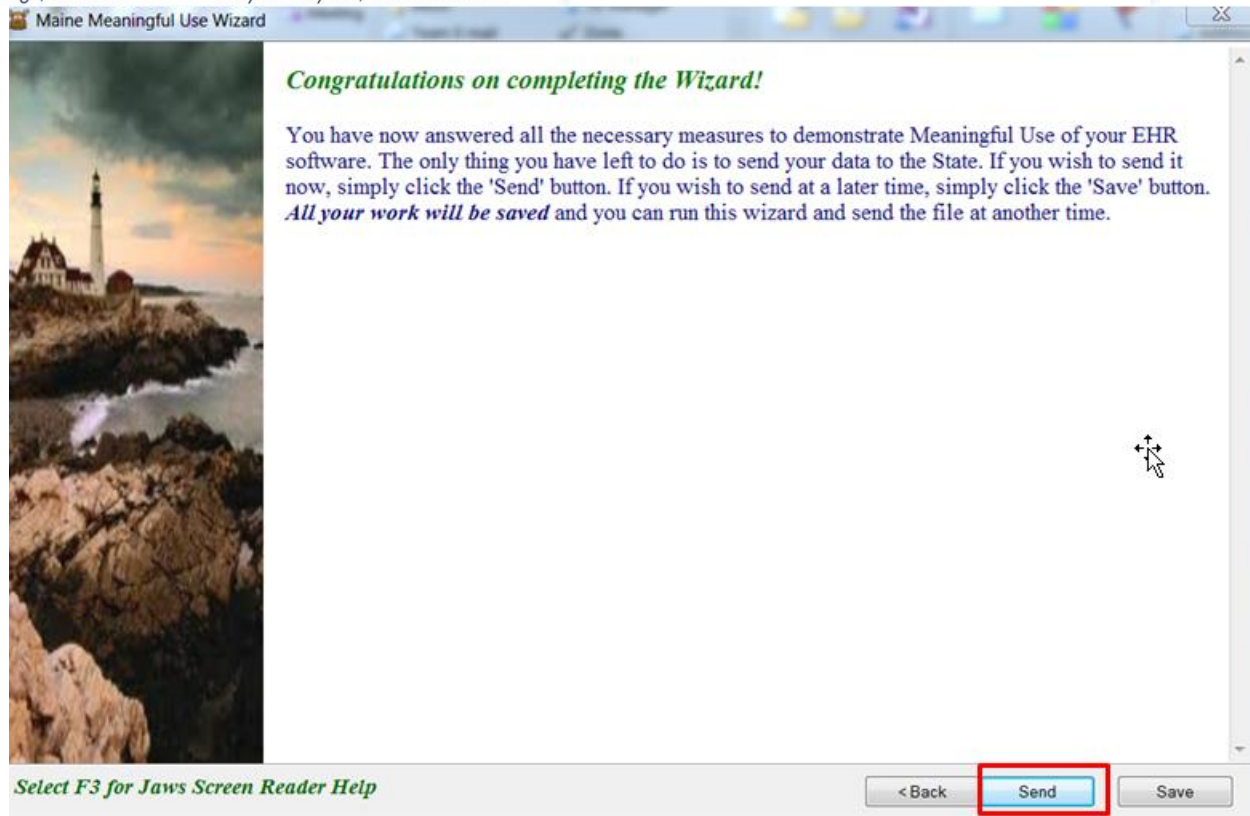
Maine OIT strongly suggests you save your settings to a file.

Save to FilePrintView in Browser

Select F3 for Jaws Screen Reader Help

< BackNext >Cancel

Click next to proceed to the submission page



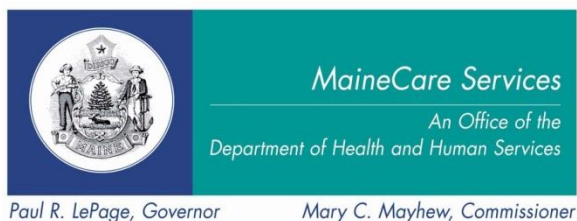
- When your information is complete the send button will be accessible
- Click the “Send” button to complete the submission to the State of Maine. The Meaningful Use data is sent by secure FTP.

Congratulations, you have completed your submission of Meaningful Use

James F. Leonard
Patti Chubbuck
April Smith
Tia Tinney
Kim Davis-Allen
MaineCare E H R Program Team

If you have any further questions please email the helpdesk:

EhrHelpdesk.DHHS@maine.gov



Wizard FAQ

Q: What is the reporting period for 2015?

A: All submissions in 2015 will be for a 90 day reporting period.

Q: Can I submit data for my providers whenever I am ready?

A: Before submitting your MU data you need to contact us with a listing of the provider(s) that are ready to submit MU. We will send out the Medicaid Eligibility worksheet for the current program year. You will need to complete the worksheet and return it via email. After the worksheet is accepted we will mark the provider eligible in the database which automatically sends out the wizard email that contains a link to the current version of the MU wizard. If you have a version of the wizard that you downloaded before July 2013 you must completely remove that version from your system before downloading the new wizard. The more recent wizard applications will update automatically when you launch them. If an update is available you be asked to allow the update. Click yes. The wizard will not accept the NPI of any provider that has **not** been marked eligible in the Maine system.

Q: Does the Wizard support Mac or Linux operating systems?

A: The Wizard requires Microsoft .NET framework to run and therefore professionals must enter their data on a Microsoft operating system (Windows XP or higher).

Q: Can I save my data and come back to work on it later?

A: Yes - The wizard will save the data entered until the submission has been marked approved in our system. The providers name will then fall out of the wizard as you cannot edit the MU submission after it has been accepted. If you find you need to update the MU data after it has been accepted please contact us and we will open the record for the new submission.

Q: Is there any way to enter multiple professionals at a time?

A: There is currently no way to enter more than one professional's MU data at a time.

Q: Why should I save and/or print my data from the 2 summary screens?

A: This will give you a copy of the information you have submitted to MaineCare which is the only documentation of this event. If you change any data in the wizard and resubmit, the original file is overwritten in the wizard. You will want to have copies of all data sent to the program previously as well as any updated information. Once the submission of meaningful use is accepted the provider's data will no longer be available in the wizard.

Email us at: EhrHelpdesk.DHHS@maine.gov and we will gladly help you with any questions or problems.